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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No. 47079-0214P1		
	First Inventor Bleich et al.		
	Title GAMING MACHINE HAVING A PLAYER TIME-SELECTABLE BONUS AWARD SCHEME AND AN INTELLIGENT BUTTON		
	Express Mail Label No. EV 306222746 US Filed on December 3, 2003		
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
<div><div><div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</div><div>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</div><div>3. <input checked="" type="checkbox"/> Specification [Total Pages 59] (preferred arrangement set forth below)<ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D Invention- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</div><div>4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 14]</div><div>5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 4]<div>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</div><div>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)<div>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</div></div></div></div><div>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</div></div> <div><div>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</div><div>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<div>a. <input type="checkbox"/> Computer Readable Form (CRF)</div><div>b. <input type="checkbox"/> Specification Sequence Listing on:<div>i. <input type="checkbox"/> CD ROM or CD-R (2 copies); or</div><div>ii. <input type="checkbox"/> paper</div></div><div>c. <input type="checkbox"/> Statement verifying identity of above copies</div></div></div>			

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Complete if Known

Application Number	
Filing Date	December 1, 2003
First Named Inventor	Charles R. Bleich
Examiner Name	
Art Unit	
Attorney Docket No.	47079-0214P1

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,594

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account:Deposit Account Number **502596/47079-0214P1**Deposit Account Name **WMS GAMING INC.**

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.
FEE CALCULATION**1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	375	Utility filing fee	770
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$770)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims		Fee from below		Fee Paid	
Total Claims	Independent Claims						
54	5	- 20** =	34	x	18	=	612
			2	x	86	=	172
Multiple Dependent = 							

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$784)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify) _____					
* Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)					(\$40)

SUBMITTED BYName (Print/Type) **Michael J. Blankstein**Registration No. **37,097**
(Attorney/Agent)**Complete (if applicable)**Telephone **773.961.1480**

Signature

Michael Blankstein

Date

12/3/03

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